

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted With Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	920214.00002
First Named Inventor	Robert J. Collier
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Art Unit	
Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ADRENERGIC RECEPTOR SNP FOR IMPROVED MILKING CHARACTERISTICS

the specification of which

(Title of the Invention)

is attached hereto

OR

was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance completing the form, call 1-800-PTO-9199 and select option 2.

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DECLARATION -- Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> The address associated with Customer Number:	26735	OR	<input type="checkbox"/> Correspondence address below
Name Sara D. Vinarov					
Address PO Box 2113					
City Madison		State WI	ZIP 53701-2113		
Country US		Telephone 608-251-5000	Email svinarov@quarles.com		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Robert J.			Family Name or Surname Collier		
Inventor's Signature 				Date 3-17-06	
Residence: City Tucson	State AZ	Country US	Citizenship US		
Mailing Address 4401 W. Mountain Side Drive					
City Tucson	State AZ	Zip 85745	Country US		
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Michael			Family Name or Surname Lohius		
Inventor's Signature				Date	
Residence: City Des Peres	State MO	Country US	Citizenship US		
Mailing Address 12959 Beaver Dam Road					
City Des Peres	State MO	Zip 63131	Country US		

Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: The address associated with Customer Number: 26735 OR Correspondence address below

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Address
PO Box 2113

City Madison	State WI	ZIP 53701-2113
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Country US	Telephone 608-251-5000	Email svinarov@quarles.com
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
Given Name (first and middle [if any]) Robert J.	Family Name or Surname Collier
Inventor's Signature	Date

Residence: City Tucson	State AZ	Country US	Citizenship US
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NAME OF SECOND INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
Given Name (first and middle [if any]) Michael	Family Name or Surname Lohius

Inventor's Signature 	Date 3/17/06
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Residence: City Des Peres	State MO	Country US	Citizenship US CANADA
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Mailing Address
12959 Beaver Dam Road

City Des Peres	State MO	Zip 63131	Country US
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Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

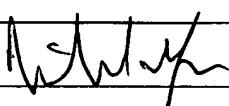
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Michael		Grosz	
Inventor's Signature 		Date 5-17-06	
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Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	